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10/574523

Docket No. 17630(AP)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Olejnik et al
Customer No.: 051957
Serial No.: Pending

Filed: Herewith

For: PHARMACEUTICAL COMPOSITIONS
COMPRISING ALPHA-2-ADRENERGICS AND
TREFOIL FACTOR FAMILY PEPTIDES

Examiner: Not assigned

Group Art Unit: Not assigned

NATIONAL STAGE PCT APPLICATION TRANSMITTAL LETTER

Mail Stop: Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir/Madam:

Enclosed herewith are the following documents:

- (x) Transmittal Letter - 4 pgs
- (x) Specification (20 pages total) consisting of 19 Claims (2 pgs) Abstract (1 page)
- (x) Declaration/Power of Attorney
- (x) Assignment with Recordation Cover Sheet
- (x) Return/postage paid Postcard
- (x) Express Mail Certificate No. EV616124888 US

CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10

I hereby certify that the above-identified documents are being deposited with the United States Postal Service on 3/30/06 in an envelope as "Express Mail Post Office To Addressee" mailing label number EV616124888 US with sufficient postage for Express Mail addressed to MS: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: 3/30/06

BONNIE FERGUSON
Name of person mailing paper

Bonnie Ferguson
Signature of person mailing paper

10/574523

Docket No. 17630(AP)

IAP15 Rec'd PCT/PTO 30 MAR 2006

REQUEST FOR COMMENCEMENT OF THE NATIONAL STAGE OF A PCT APPLICATION
UNDER 35 U.S.C. § 371

To the Commissioner for Patents:

This is a request for commencement of the national stage under 35 U.S.C. § 371 of PCT/US2004/027914, filed on August 24, 2004 claims the benefit of Provisional Application, Serial No. 60/509,955, filed on October 8, 2003 entitled PHARMACEUTICAL COMPOSITIONS COMPRISING ALPHA-2-ADRENERGICS AND TREFOIL FACTOR FAMILY PEPTIDES by the following named inventor(s):

1	Full Name of Inventor	Last Name: Olejnik	First Name: Orest	Middle Name:
	Residence and Citizenship	City: Coto de Caza	State or Foreign Country: California	Country Of Citizenship: U.S.A.
	Post Office Address	Post Office Address: 5 Addington Place	City: Coto de Caza	State or Country: California Zip Code: 92679
2	Full Name of Inventor	Last Name: Bakhit	First Name: Peter	Middle Name: G.
	Residence and Citizenship	City: Huntington Beach	State or Foreign Country: California	Country Of Citizenship: U.S.A.
	Post Office Address	Post Office Address: 8441 Spring Circle	City: Huntington Beach	State or Country: California Zip Code: 92646
3	Full Name of Inventor	Last Name: Graham	First Name: Richard	Middle Name:
	Residence and Citizenship	City: Irvine	State or Foreign Country: California	Country Of Citizenship: U.S.A.
	Post Office Address	Post Office Address: 5066 Balsawood	City: Irvine	State or Country: California Zip Code: 92612

Applicants expressly request that the national stage of processing commence as soon as the application is in order for such purpose and the applicable requirements of 35 USC § 371(c) have been complied with.

Please cancel any amendments which have been made to the claims under Article 19 or

Article 34 of the PCT.

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 17 pages, 19 claims (2 pages) and an abstract (1 page).

Oath or Declaration

(X) Enclosed is a fully executed oath or declaration.

() Enclosed is an unsigned oath or declaration.

(X) A self-addressed return postcard is enclosed for verification of receipt.

(X) The filing fee is calculated below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic National Fee (37 CFR 1.492(a))			\$300.00	\$300.00
Examination Fee (37 CFR 1.492(c) - all other situations)			\$200.00	\$200.00
Search Fee (37 CFR 1.492(b) - International Search Report prepared by an ISA other than the US and provided to the Office or previously communicated to the US by the IB			\$400.00	\$400.00
Total Claims in Excess of 20	19	minus 20 = -19- x	\$50.00	\$0.00
Independent Claims in Excess of Three	3	minus 3 = -0- x	\$200.00	\$0.00
If application contains any multiple dependent claims, then add			\$360.00	\$0.00
Total Sheets	20	minus 100 = -0-	\$50.00	\$0.00
Utility Application Size Fee - for each additional 50 sheets that exceeds 100 sheets			\$250.00	\$0.00
Processing Fee			\$130.00	\$0.00
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) \$40.00 per property			\$40.00	\$40.00
TOTAL FILING FEE				\$940.00

(X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.

(X) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed.

() New drawing(s) are enclosed ____ sheets.

() A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.

() A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.

The PTO did not receive the following listed items:
Assignment
Drawing

